## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

(703) 746-4000 or <u>Fax</u>

appropriate. All further cor indicated unless corrected t maintenance fee notification	respondence including the I below or directed otherwise 18	atent, advance orders and r in Block I, by (a) specifying	notification of maintenance fing a new correspondence add	required). Blocks I through 4 tes will be mailed to the currer lress; and/or (b) indicating a sep	et correspondence address as
30611 75	22 ADDRESS (Note: Legibly mark-up 590 03/25/2004	with any corrections or use Block 1)	Fee(s) Transmitta	te of mailing can only be used I. This certificate cannot be used tional paper, such as an assign ficate of mailing or transmission	nent of tormal drawing must
ERIC KARPLUS 30 SANDWICH RI EAST FALMOUT	<b>D</b>	JUL 0 2 2004 6	addressed to the	Certificate of Mailing or Tran nat this Fee(s) Transmittal is bei rice with sufficient postage for f Mail Stop ISSUE FEE addres USPTO, on the date indicated b	ng deposited with the United irst class mail in an envelope is above, or being facsimile
		THE TOANE LEET	Arlene	C. Granlund	(Depositor's name) (Signature)
			June 24	, 2004	(Date)
APPLICATION NO.	FILING DATE	FIRST NA	MED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/035,684	0/035,684 11/01/2001 Eric Karr		c Karplus		4600
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FERGURAL	Outrous Control
nonprovisional	YES	\$665	\$300	TOTAL FEE(S) DUE	DATE DUE
		-		\$965	06/25/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
GABOR,	, OTILIA	2878	250-370100		
Address form PTO/SB/122) attached.  O "Fee Address" indication (or "Fee Ad		ion form agent) attorne	firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		
PLEASE NOTE: Unless been previously submitte (A) NAME OF ASSIGNI Radiation M	EE	ow, no assignee data will ap ubmitted under separate cov (B) RESIDE Ces, Inc., Wat		of assignee data is only appropi NOT a substitute for filing an as COUNTRY)	riate when an assignment has signment.
Please check the appropriate	assignee category or categor	ries (will not be printed on th	ne patent); O individual	Corporation or other private	group entity    government
4a. The following fee(s) are	enclosed:	4b. Payment	of Fee(s):		
X) Issue Fee		A check in the amount of the fee(s) is enclosed.			
D Publication Fee Advance Order - # of Copies		Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-1430 (enclose an extra copy of this form).			
<del></del>				aid issue fee to the application ic	
<u> </u>			**************************************		
(Authorized Signature)	1/1000	(Date)			
NOTE: The Issue Fee and other than the applicant; interest as shown by the rec	Publication Fee (if require a registered attorney or age cords of the United States Pa	ed) will not be accepted fro ent; or the assignee or othe tent and Trademark Office.	om anyone er party in		
This collection of informa obtain or retain a benefit	tion is required by 37 CFR by the public which is to fi vis governed by 35 U.S.C. I tests to complete, including gam to the USPTO. Time will the amount of time you rhis burden, should be sent toffice, U.S. Department (END FEES OR COMPLE for Patents Alexandria Vire	1.311. The information is r le (and by the USPTO to p	required to process) an	7/08/2004 MMEKONE1 0000 FC:2501 665.00 FC:8001 36.00 FC:1504 300.00	DA DA

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.